

Practitioner's Docket No. 1737.31

PATENT

COMBINED DECLARATION AND POWER OF ATTORNEY**(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL,
CONTINUATION, OR C-I-P)**

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is of the following type :

☒ original
☐ design
☐ supplemental☐ national stage of PCT☐ divisional
☐ continuation
☐ continuation in part**INVENTORSHIP IDENTIFICATION**

My RESIDENCE/POST OFFICE address and citizenship are as stated below, next to my name. I believe that I am the original, first and sole inventor of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

TITLE OF INVENTION**SPECIFICATION IDENTIFICATION**

The specification is attached hereto.

ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, Section 1.56, and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent.

PRIORITY CLAIM (35 U.S.C. Section 119(a)-(d))

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d) of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international

(Declaration and Power of Attorney—page __ of __)

application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

Such applications have been filed as follows.

**PRIOR PCT APPLICATION(S) FILED WITHIN 12 MONTHS
(6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION
AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. SECTION 119(a)-(d)**

COUNTRY (INDICATE IF PCT)	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
JAPAN	2003-066610	MARCH 12, 2003	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

POWER OF ATTORNEY

I hereby appoint the following practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

APPOINTED PRACTITIONER(S)

Joseph C. Mason, Jr.

Dennis G. LaPointe

REGISTRATION NUMBER(S)

20,153

40,693

SEND CORRESPONDENCE TO

Mason & Associates, P.A.
17757 U.S. Hwy 19 North
Suite 500
Clearwater, FL 33764

DIRECT TELEPHONE CALLS TO:

727-538-3800

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

Full name of sole or first inventor

INVENTOR			Country of of Citizenship
Given Name	Middle Initial	Family (Last) Name	
AKIRA		TANI	JAPAN

RESIDENCE/Post Office Address	CITY	Country
1-8-17 HIGASHIKASAI, EDOGAWA-KU,	TOKYO	JAPAN

Inventor's Signature: Tani AKIRA

Date: August 12, 2003

Full name of second joint inventor, if any

INVENTOR			Country of of Citizenship
Given Name	Middle Initial	Family (Last) Name	

RESIDENCE/Post Office Address	CITY	Country

Inventor's Signature: _____

Date: _____

Full name of third joint inventor, if any

INVENTOR			Country of of Citizenship
Given Name	Middle Initial	Family (Last) Name	

RESIDENCE/Post Office Address	CITY	Country

Inventor's Signature: _____

Date: _____

(check proper box(es) for any of the following added page(s) that form a part of this declaration)

- ☐ Signature for fourth and subsequent joint inventors. Number of pages added: ____.
- ☐ Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. Number of pages added: ____.
- ☐ Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. Number of pages added: ____.
- ☐ Added page for signature by one joint inventor on behalf of deceased inventor(s) where legal representative cannot be appointed in time. (37 CFR 1.47)
- ☐ Added pages to combined declaration and power of attorney for divisional, continuation, or continuation-in-part (C-I-P) application. ☐ Number of pages added: ____.